

STATEMENT OF ECONOMIC INTERESTS

Date Received
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COVER PAGE

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TF

NAME (LAST)	NAME (FIRST)	NAME (MIDDLE)	DAYTIME TELEPHONE NUMBER
Aguirre	Joe	E.	
MAILING ADDRESS STREET (Business Address Acceptable)	CITY (d)(5)	STATE	ZIP CODE

1. Office, Agency, or Court

Name of Office, Agency, or Court:
Delano City Council

Division, Board, District, if applicable:
Council Member

Your Position:
Elected official

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)
Delano

Agency: _____

Position: Council member

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ County of _____

☒ City of Delano

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Assuming Office/Initial Date: 12/01/10

☐ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through December 31, 2009.

☐ Leaving Office Date Left: ____/____/____ (Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: _____

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes - schedule attached
Investments (10% or Greater Ownership)

Schedule B ☐ Yes - schedule attached
Real Property

Schedule C ☐ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☐ Yes - schedule attached
Income - Gifts

Schedule E ☐ Yes - schedule attached
Income - Gifts - Travel Payments

-or-

☒ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed: 12/27/10
(month, day, year)

Signature: _____